**OFFEROR’S LETTER TO UNDP**

**CONFIRMING INTEREST AND AVAILABILITY**

**FOR THE INDIVIDUAL CONTRACTOR (IC) ASSIGNMENT**

Date

***Head of Procurement Unit***

**United Nations Development Programme**

***Menara Thamrin Building, 7th Floor***

***Jl. M. H. Thamrin Kav. 3, Jakarta, 10250***

Dear Sir/Madam:

I hereby declare that:

1. I have read, understood and hereby accept the Terms of Reference describing the duties and responsibilities of **IT Policy Specialist** for theRESTORE Project Component 1 – Health System Strengthening;
2. I have also read, understood and hereby accept UNDP’s General Conditions of Contract for the Services of the Individual Contractors;
3. I hereby propose my services and I confirm my interest in performing the assignment through the submission of my CV which I have duly signed and attached hereto as Annex 1;
4. In compliance with the requirements of the Terms of Reference, I hereby confirm that I am available for the entire duration of the assignment, and I shall perform the services in the manner described in my proposed approach/methodology which I have attached hereto as Annex 3;
5. I hereby propose to complete the services based on the following payment rate: *[please check the box corresponding to the preferred option]:*

* An all-inclusive daily fee of [*state amount in words and in numbers indicating currency]*
* A total lump sum of [*state amount in words and in numbers, indicating exact currency]*, payable in the manner described in the Terms of Reference.

1. For your evaluation, the breakdown of the abovementioned all-inclusive amount is attached hereto as Annex 2;
2. I recognize that the payment of the abovementioned amounts due to me shall be based on my delivery of outputs within the timeframe specified in the TOR, which shall be subject to UNDP's review, acceptance and payment certification procedures;
3. This offer shall remain valid for a total period of \_\_\_\_\_\_\_\_\_\_\_ days [*minimum of 90 days*] after the submission deadline;
4. I confirm that I have no first degree relative (mother, father, son, daughter, spouse/partner, brother or sister) currently employed with any UN agency or office *[disclose the name of the relative, the UN office employing the relative, and the relationship if, any such relationship exists];*
5. If I am selected for this assignment, I shall *[please check the appropriate box]:*

* Sign an Individual Contract with UNDP;
* Request my employer *[state name of company/organization/institution]* to sign with UNDP a Reimbursable Loan Agreement (RLA), for and on my behalf. The contact person and details of my employer for this purpose are as follows:

1. I hereby confirm that *[check all that applies]*:

* At the time of this submission, I have no active Individual Contract or any form of engagement with any Business Unit of UNDP;
* I am currently engaged with UNDP and/or other entities for the following work:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Assignment** | **Contract Type** | **UNDP Business Unit / Name of Institution/Company** | **Contract Duration** | **Contract Amount** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

* I am also anticipating conclusion of the following work from UNDP and/or other entities for which I have submitted a proposal:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Assignment** | **Contract Type** | **Name of Institution/ Company** | **Contract Duration** | **Contract Amount** |
|  |  |  |  |  |
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|  |  |  |  |  |

1. I fully understand and recognize that UNDP is not bound to accept this proposal, and I also understand and accept that I shall bear all costs associated with its preparation and submission and that UNDP will in no case be responsible or liable for those costs, regardless of the conduct or outcome of the selection process.
2. ***If you are a former staff member of the United Nations recently separated, please add this section to your letter:*** I hereby confirm that I have complied with the minimum break in service required before I can be eligible for an Individual Contract.
3. I also fully understand that, if I am engaged as an Individual Contractor, I have no expectations nor entitlements whatsoever to be re-instated or re-employed as a staff member.
4. Are any of your relatives employed by UNDP, any other UN organization or any other public international organization?

C:\Users\jennifer.pareja\Desktop\bpi.PNGYES  NO If the answer is "yes", give the following information:

|  |  |  |
| --- | --- | --- |
| **Name** | **Relationship** | **Name of International Organization** |
|  |  |  |
|  |  |  |
|  |  |  |

1. Do you have any objections to our making enquiries of your present employer?

YES  NO 

1. Are you now, or have you ever been a permanent civil servant in your government’s employ?

YES  NO  If answer is "yes", WHEN?

1. REFERENCES: List three persons, not related to you, who are familiar with your character and qualifications.

|  |  |  |
| --- | --- | --- |
| **Full Name** | **Full Address** | **Business or Occupation** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. Have you been arrested, indicted, or summoned into court as a defendant in a criminal proceeding, or convicted, fined or imprisoned for the violation of any law (excluding minor traffic violations)?

YES  NO  If "yes", give full particulars of each case in an attached statement.

I certify that the statements made by me in answer to the foregoing questions are true, complete and correct to the best of my knowledge and belief. I understand that any misrepresentation or material omission made on a Personal History form or other document requested by the Organization may result in the termination of the service contract or special services agreement without notice.

DATE: SIGNATURE:

NB. You will be requested to supply documentary evidence which support the statements you have made above. Do not, however, send any documentary evidence until you have been asked to do so and, in any event, do not submit the original texts of references or testimonials unless they have been obtained for the sole use of UNDP.

**Annexes** *[please check all that applies]***:**

* CV shall include Education/Qualification, Processional Certification, Employment Records /Experience
* Breakdown of Costs Supporting the Final All-Inclusive Price as per Template
* Brief Description of Approach to Work (if required by the TOR)

**ANNEX 2**

**BREAKDOWN OF COSTS[[1]](#footnote-1)**

**SUPPORTING THE ALL-INCLUSIVE FINANCIAL PROPOSAL**

1. **Breakdown of Cost by Components:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Cost Components** | **Unit Cost** | **Quantity** | **Total Rate for the Contract Duration (IDR)** |
| 1. **Personnel Costs** |  |  |  |
| Professional Fees |  |  |  |
| Life Insurance |  |  |  |
| Medical Insurance |  |  |  |
| Communications |  |  |  |
| Land Transportation |  |  |  |
| Others (pls. specify) |  |  |  |
|  |  |  |  |
| 1. **Travel[[2]](#footnote-2) Expenses to Join duty station** |  |  |  |
| Round Trip Airfares to and from duty station |  |  |  |
| Living Allowance |  |  |  |
| Travel Insurance |  |  |  |
| Terminal Expenses |  |  |  |
| Others (pls. specify) |  |  |  |
|  |  |  |  |
| 1. **Duty Travel** |  |  |  |
| Round Trip Airfares |  |  |  |
| Living Allowance |  |  |  |
| Travel Insurance |  |  |  |
| Terminal Expenses |  |  |  |
| Others (pls. specify) |  |  |  |

1. **Breakdown of Cost by Deliverables\***

|  |  |  |
| --- | --- | --- |
| **Deliverable/Outputs** | **Percentage of Total Price (Weight for Payment)** | **Amount (IDR)** |
| **1st Deliverable**  Technical Assistance:   * Designing Digital Health Strategic Work Plan on data management improvement. * Recommendation of digital health policy. |  |  |
| 2nd Deliverable:  Platform Development:   * Telemedicine platforms collaboration report. * Report on development of multi stakeholders’ platform for international and local manufacturers and suppliers. |  |  |
| 3rd Deliverable:  Electronic Monitoring System Development:   * Supply chain management information system of international and local manufacturers and suppliers is established to provide sufficient database in meeting the hospital demand for medical supplies. * Digital medical waste data monitoring in health services including in emergency hospitals is established to protect community from covid-19 medical waste. |  |  |
| Total | 100% | IDR ……. |

*\*Basis for payment tranches*

1. The costs should only cover the requirements identified in the Terms of Reference (TOR) [↑](#footnote-ref-1)
2. Travel expenses are not required if the consultant will be working from home. [↑](#footnote-ref-2)